Fill	in this inform	ation to identify your case:		
Deb	otor 1	Phillip Dale Daniels		
	0	First Name Middle Name Last Name		
1 -	otor 2 use if, filing)	First Name Middle Name Last Name		
Uni	ted States Ban	kruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI		
Cas	se number			
(if kn	own)		_	ck if this is an nded filing
			arrici	laca liilig
Of	ficial For	m 106Sum		
		Your Assets and Liabilities and Certain Statistical Information		12/15
info	rmation. Fill o	nd accurate as possible. If two married people are filing together, both are equally responsible fout all of your schedules first; then complete the information on this form. If you are filing amendes, you must fill out a new <i>Summary</i> and check the box at the top of this page. Trize Your Assets		
				assets of what you own
1.	Schedule M	B: Property (Official Form 106A/B)	Value	2. mai jou own
٠.	1a. Copy line	55, Total real estate, from Schedule A/B	\$	36,000.00
	1b. Copy line	62, Total personal property, from Schedule A/B	\$	86,773.79
	1c. Copy line	63, Total of all property on Schedule A/B	\$	122,773.79
Par	t 2: Summa	rize Your Liabilities		
				liabilities nt you owe
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	67,390.00
3.		F: Creditors Who Have Unsecured Claims (Official Form 106E/F) total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	76,522.53
		Your total liabilities	\$	143,912.53
Par	t 3: Summa	rize Your Income and Expenses		
4.		four Income (Official Form 106I) mbined monthly income from line 12 of Schedule I	\$	6,909.83
5.	Schedule J: Copy your m	Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J	\$	5,021.67
Par	t 4: Answei	These Questions for Administrative and Statistical Records		
6.	-	g for bankruptcy under Chapters 7, 11, or 13? have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	chedules.
7.	■ Yes What kind o	debt do you have?		
	■ Your de	bbts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bld purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	ı persona	l, family, or

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Deb	tor 1	Phillip Dale Daniels	Case number (if known)	
8.		n the Statement of Your Current Monthly Income: Cop -1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L		\$ 7,908.21

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Deb	or 1	Phillip Dale D	aniale					
Den	.01 1	First Name		e Name	Last Name			
Deb	or 2 se, if filing)	First Name	Middle	e Name	Last Name			
					RICT OF MISSISSIPPI			
Unit	ed States Ban	kruptcy Court for t	ne: 3001HER	וו טוט וו	KICT OF MISSISSIFFI			
Cas	e number							☐ Check if this is ar amended filing
∵ tt	:-:-! -	400 A /D						
		m 106A/B A/B: Pr	onerty					12/15
				an accot	only once. If an asset fits in more than or	ne category lis	et the asset in	
Part		ach Residence, Bui			Estate You Own or Have an Interest In			
	No. Go to Part	2.						
_								
	Yes. Where is	the property?						
	Yes. Where is	the property?						
1 1	Yes. Where is	the property?		What	t is the property? Check all that apply			
1.1	Yes. Where is 3948 CR 23	, , ,		What	t is the property? Check all that apply Single-family home	Do not dec	luct secured cl	aims or exemptions. Put
1.1	3948 CR 23	, , ,	ription	■	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amoun	t of any secure	aims or exemptions. Put ed claims on <i>Schedule D:</i> ms Secured by <i>Property</i> .
1.1	3948 CR 23	3	ription	■ □	Single-family home Duplex or multi-unit building Condominium or cooperative	the amoun	t of any secure	ed claims on Schedule D:
1.1	3948 CR 23	3	ription	■	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amoun	t of any secure Who Have Clai	ed claims on Schedule D:
1.1	3948 CR 23 Street address, if	3 available, or other descr			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Current va	t of any secure Who Have Clai	ed claims on Schedule D: ms Secured by Property. Current value of the
1.1	3948 CR 23 Street address, if	available, or other descri	39338-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current va entire pro	t of any secure Who Have Clair Islue of the perty? 36,000.00 he nature of y	Current value of the portion you own? \$36,000.00
1.1	3948 CR 23 Street address, if	available, or other descri	39338-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current va entire proj	t of any secure Who Have Clair Islue of the perty? 36,000.00 he nature of y	current value of the portion you own? \$36,000.00
1.1	3948 CR 23 Street address, if Louin City	available, or other descri	39338-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current va entire proj	t of any secure Who Have Clair Islue of the perty? 36,000.00 the nature of yee simple, ter	Current value of the portion you own? \$36,000.00
1.1	3948 CR 23 Street address, if	available, or other descri	39338-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current va entire prop \$: Describe t (such as f a life estat	alue of the perty? 36,000.00 he nature of yee simple, ter ye), if known.	Current value of the portion you own? \$36,000.00 your ownership interest lancy by the entireties, or
1.1	3948 CR 23 Street address, if Louin City Jasper	available, or other descri	39338-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current va entire proj	t of any secure Who Have Clair slue of the perty? 36,000.00 he nature of ye ee simple, ter tee), if known.	Current value of the portion you own? \$36,000.00
1.1	3948 CR 23 Street address, if Louin City Jasper	available, or other descri	39338-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current va entire proj	t of any secure Who Have Clair slue of the perty? 36,000.00 he nature of ye ee simple, ter tee), if known.	Current value of the portion you own? \$36,000.00 your ownership interest lancy by the entireties, or
1.1	3948 CR 23 Street address, if Louin City Jasper	available, or other descri	39338-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this it	Current va entire proj	t of any secure Who Have Clair slue of the perty? 36,000.00 he nature of ye ee simple, ter tee), if known.	Current value of the portion you own? \$36,000.00 your ownership interest lancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debt	or 1 <u>P</u>	hillip Dale Daniels		Case number (if known)	
Ca	rs. vans.	trucks, tractors, sport utility ve	hicles. motorcycles		
	, ,	,,,	,,,		
	No				
	Yes				
_	. 00				
		loon		Do not deduct secured clai	ms or exemptions. Put
3.1	Make:	Jeep	Who has an interest in the property? Check one	the amount of any secured	claims on Schedule D:
	Model:	Gladiator	■ Debtor 1 only	Creditors Who Have Claim	s Secured by Property.
	Year:	2020	Debtor 2 only	Current value of the	Current value of the
		nate mileage: 109000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:	At least one of the debtors and another		
			_	\$24,120.00	¢24.420.00
			☐ Check if this is community property (see instructions)	φ24,120.00	\$24,120.00
3.2	Make:	Dodge	Who has an interest in the property? Check one	Do not deduct secured clai	
	Model:	Magnum	■ Debtor 1 only	the amount of any secured Creditors Who Have Claim	s Secured by Property
	Year:	2008	Debtor 2 only		
		nate mileage: 248000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another	onino property.	pormon you ourn
	011101 1111	omaton.	At least one of the debtors and another		
			☐ Check if this is community property	\$495.00	\$495.00
			(see instructions)		
					5.
3.3	Make:	Dodge	Who has an interest in the property? Check one	Do not deduct secured clai the amount of any secured	
	Model:	Ram	■ Debtor 1 only	Creditors Who Have Claim	
	Year:	2006	Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage: 345000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:	At least one of the debtors and another		
	Does n	ot run			
			☐ Check if this is community property	\$500.00	\$500.00
			(see instructions)		
Exa	mples: B		d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc		
4.1	Make:	Load & Trail	Who has an interest in the property? Check one	Do not deduct secured clai	
	Model:	Pull behind trailer	■ Debtor 1 only	the amount of any secured Creditors Who Have Claim	
	Year:	2017	Debtor 2 only	Current value of the	Current value of the
			☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:	\square At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$850.00	\$850.00
	<u></u>		(
4.2	Make:	Keystone	Who has an interest in the property? Check one	Do not deduct secured clai	ms or exemptions. Put
		Spring Dala Carrer	Debter 4 cells	the amount of any secured	claims on Schedule D:
	Model:	Spring Dale Camper	■ Debtor 1 only	Creditors Who Have Claim	s Secured by Property.
	Year:	2016	Debtor 2 only	Current value of the	Current value of the
	0.1		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Otner inf	ormation:	At least one of the debtors and another	¢45 040 00	¢4E 040 00
	1		☐ Check if this is community property	\$15,210.00	\$15,210.00

Debtor 1	Phillip Dale Dar	iels Case number (if kr.	own)
5 Add th	ne dollar value of the	portion you own for all of your entries from Part 2, including any entries for	
		or Part 2. Write that number here=	*> \$41,175.00
Part 3: De	escribe Your Personal a	nd Household Items	
Do you o	wn or have any lega	or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	hold goods and furni bles: Major appliances	shings furniture, linens, china, kitchenware	
Yes	. Describe		
	Н	busehold Goods	\$250.00
□ No	oles: Televisions and r	adios; audio, video, stereo, and digital equipment; computers, printers, scanners; munes, cameras, media players, games	ısic collections; electronic devices
	[FI		\$160.00
	<u>[E</u>	ectronics	<u> </u>
Examp		rines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, memorabilia, collectibles	coin, or baseball card collections;
Examp □ No	nent for sports and holes: Sports, photograp musical instrume	hic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; car	noes and kayaks; carpentry tools;
	Fi	shing equipment	\$30.00
☐ No	nples: Pistols, rifles, sh . Describe	otguns, ammunition, and related equipment Marlin Pistol	\$140.00
	38	0 Pistol	\$240.00
☐ No		s, furs, leather coats, designer wear, shoes, accessories	
	С	othing	\$200.00
☐ No		v, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ge	ms, gold, silver

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Debtor 1	Phillip Dale D	Daniels		Case number (if known)	
		Jewel	ry		\$60.00
□ No	m animals les: Dogs, cats, b	pirds, ho	rses		
		Pets			\$20.00
■ No	er personal and			t already list, including any health aids you did not list	
				3, including any entries for pages you have attached	\$1,100.00
Part 4: Des	cribe Your Financ	ial Asset	s		
			quitable interest in an	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
17. Deposit Example No		ıvings, o	r other financial account	ts; certificates of deposit; shares in credit unions, brokerage th the same institution, list each. Institution name:	houses, and other similar
		17.1.	Checking	Community Bank	\$388.00
		17.2.	Savings	Community Bank	\$274.00
		17.3.	Christmas club savings	Community Bank	\$700.00
		17.4.	Checking	Trustmark	\$494.00
Examp. ■ No □ Yes	les: Bond funds, i	investme	Institution or issuer nar		
19. Non-pu joint ve ■ No		ock and	interests in incorpora	ted and unincorporated businesses, including an intere	st in an LLC, partnership, and
	Give specific info		about them	% of ownership:	

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Debtor 1	Phillip Dale Daniels		Case number (if known)	
Neg	<i>gotiable instrument</i> s include perso	and other negotiable and non-negotiable onal checks, cashiers' checks, promissory ne you cannot transfer to someone by signing	notes, and money orders.	
■ No				
	es. Give specific information about Issuer n			
21. Reti i <i>Exa</i> □ No		Keogh, 401(k), 403(b), thrift savings accoun	ts, or other pension or profit-sharing plans	
■ Ye	es. List each account separately. Type of ac	count: Institution name:		
		401(k)		\$27,642.79
You <i>Exa</i>	mples: Agreements with landlords	u have made so that you may continue serv	vice or use from a company , water), telecommunications companies, or others	
■ No	es	Institution name or in	ndividual:	
_		ayment of money to you, either for life or for	r a number of years)	
■ No □ Ye	o es Issuer name an	d description.		
24. Inter e 26 U.	ests in an education IRA, in an S.C. §§ 530(b)(1), 529A(b), and §	account in a qualified ABLE program, or 529(b)(1).	r under a qualified state tuition program.	
■ No	•	e and description. Separately file the records	s of any interests.11 U.S.C. § 521(c):	
■ No)		in line 1), and rights or powers exercisable for your	benefit
⊔ Ye	es. Give specific information abou	it tnem		
	mples: Internet domain names, w	ade secrets, and other intellectual prope /ebsites, proceeds from royalties and licens		
	es. Give specific information abou			
<i>Exa</i> ■ No		e licenses, cooperative association holdings	s, liquor licenses, professional licenses	
☐ Ye	es. Give specific information abou	ıt them		
Money	or property owed to you?		Current valu portion you Do not deduc claims or exe	own? ct secured
28. Tax	refunds owed to you			
■ Ye	es. Give specific information abou	t them, including whether you already filed	the returns and the tax years	
		Federal Tax Refund		\$5,000.00
		State Tax Refund		\$5.000.00

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Debtor 1	Phillip Dale Daniels		Case number (if known)			
		EIC		\$5,000.00		
		EIC		<u></u>		
■ No		ny, spousal support, child suppo	ort, maintenance, divorce settlement, property	v settlement		
	amounts someone owes you nples: Unpaid wages, disability insu benefits; unpaid loans you n	urance payments, disability bend nade to someone else	efits, sick pay, vacation pay, workers' compe	nsation, Social Security		
☐ Yes	. Give specific information					
Exam □ No			HSA); credit, homeowner's, or renter's insura	nce		
■ Yes	. Name the insurance company of Company		Beneficiary:	Surrender or refund value:		
	Life Insu	rance - no cash value		\$0.00		
	l ife Insu	rance - no cash value		\$0.00		
If you some	nterest in property that is due you are the beneficiary of a living trustone has died. . Give specific information		a surance policy, or are currently entitled to rec	eive property because		
Exam ■ No	s against third parties, whether apples: Accidents, employment disp . Describe each claim		t or made a demand for payment to sue			
■ No	contingent and unliquidated cla	ims of every nature, including	g counterclaims of the debtor and rights to	o set off claims		
■ No	nancial assets you did not alrea	dy list				
	the dollar value of all of your en Part 4. Write that number here		ny entries for pages you have attached	\$44,498.79		
Part 5: Do	escribe Any Business-Related Prope	rty You Own or Have an Interest I	n. List any real estate in Part 1.			
	own or have any legal or equitable into the Part 6.	nterest in any business-related pr	roperty?			
☐ Yes.	Go to line 38.					

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Deb	tor 1	Phillip Dale Daniels		_	Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have a	n Intere	est In.	
46. [o you	own or have any legal or equitable interest in any far	m- or commerci	al fishi	ng-related property?	
	No.	Go to Part 7.				
	☐ Yes	. Go to line 47.				
Part	7:	Describe All Property You Own or Have an Interest in That	You Did Not List A	bove		
		have other property of any kind you did not already li	st?			
	_	oles: Season tickets, country club membership				
	No					
L	I Yes.	Give specific information				
EΛ	۸ طط 4	he dollar value of all of your entries from Part 7. Write	that number ha			£0.00
54.	Auu i	ne donar value of all of your entries from Fart 7. Write	that number he	· · · · · · · · · · · · · · · · · · ·		\$0.00
Part	8:	List the Totals of Each Part of this Form				
rait	·.					
55.	Part 1	: Total real estate, line 2				\$36,000.00
56.	Part 2	2: Total vehicles, line 5	\$41,1	75.00		
57.	Part 3	3: Total personal and household items, line 15	\$1,1	00.00		
58.	Part 4	l: Total financial assets, line 36	\$44,4	98.79		
59.	Part 5	5: Total business-related property, line 45		\$0.00		
60.	Part 6	S: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$86,7	73.79	Copy personal property total	sal \$86,773.79
63.	Total	of all property on Schedule A/B. Add line 55 + line 62				\$122,773,79

		25-51003	Dkt 4	Filed 07/14/25	Entered 07	7/14/25 15:47:29	Page 10	of 64	
Fi	II in this info	rmation to identi	fy your ca	se:					
De	ebtor 1	Phillip Dale	e Daniels						
D	ebtor 2	First Name		Middle Name	Last Name				
1	pouse if, filing)	First Name		Middle Name	Last Name				
Ur	nited States B	ankruptcy Court fo	or the:	SOUTHERN DISTRICT	COF MISSISSIPPI				
C	ase number		_						
	known)							Check if this is an amended filing	
\cap	fficial Fo	orm 106C							
			e Pro	perty You (Claim as	Exempt		4/2	25
the nee	property you	listed on Schedul nd attach to this p	le A/B: Pro	perty (Official Form 10	6A/B) as your sourc	n are equally responsible e, list the property that you cessary. On the top of ar	u claim as ex	empt. If more space is	•
spo any fur exe	ecific dollar a y applicable s nds—may be emption to a	amount as exemp statutory limit. So unlimited in doll	ot. Alterna ome exem ar amoun amount a	ntively, you may claim nptions—such as thos t. However, if you clai	the full fair marke se for health aids, m an exemption o	he exemption you claim t value of the property b rights to receive certain f 100% of fair market va ed to exceed that amou	eing exempt benefits, and lue under a l	ted up to the amount o d tax-exempt retirement aw that limits the	nt
Pa	art 1: Ident	tify the Property	You Clain	n as Exempt					
1.	Which set	of exemptions ar	e you clai	ming? Check one only	, even if your spous	e is filing with you.			
	■ You are	claiming state and	federal no	onbankruptcy exemptio	ns. 11 U.S.C. § 52	2(b)(3)			
	☐ You are	claiming federal e	xemptions	. 11 U.S.C. § 522(b)(2)				
_	_								

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
3948 CR 23 Louin, MS 39338 Jasper County	\$36,000.00		\$13,690.00	Miss. Code Ann. § 85-3-21
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2020 Jeep Gladiator 109000 miles	\$24,120.00		\$0.00	Miss. Code Ann. § 85-3-1(a
Line Holli Schedule A.D. 3.1			100% of fair market value, up to any applicable statutory limit	
2008 Dodge Magnum 248000 miles	\$495.00		\$495.00	Miss. Code Ann. § 85-3-1(a
Ellie Holli Gonedale AVE. 3.2			100% of fair market value, up to any applicable statutory limit	
2006 Dodge Ram 345000 miles	\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a
Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
Household Goods Line from Schedule A/B: 6.1	\$250.00		\$250.00	Miss. Code Ann. § 85-3-1(a
Line nom Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Electronics	\$160.00		\$160.00	Miss. Code Ann. § 85-3-1(
ine from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit	
Fishing equipment Line from Schedule A/B: 9.1	\$30.00		\$30.00	Miss. Code Ann. § 85-3-1(
			100% of fair market value, up to any applicable statutory limit	
22 Marlin Pistol Line from Schedule A/B: 10.1	\$140.00		\$140.00	Miss. Code Ann. § 85-3-1(
and norm confedure /v 2. Terr			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$200.00		\$200.00	Miss. Code Ann. § 85-3-1(
			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$60.00		\$60.00	Miss. Code Ann. § 85-3-1(
			100% of fair market value, up to any applicable statutory limit	
Pets Line from Schedule A/B: 13.1	\$20.00		\$20.00	Miss. Code Ann. § 85-3-1(
			100% of fair market value, up to any applicable statutory limit	
101(k) Line from S <i>chedule A/B</i> : 21.1	\$27,642.79			Miss. Code Ann. § 85-3-1(
io noin concaule /v.b. = 111			100% of fair market value, up to any applicable statutory limit	
Federal Tax Refund ine from Schedule A/B: 28.1	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(
			100% of fair market value, up to any applicable statutory limit	
State Tax Refund Line from Schedule A/B: 28.2	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(
			100% of fair market value, up to any applicable statutory limit	
EIC Line from Schedule A/B: 28.3	\$5,000.00		\$5,000.00	Miss. Code Ann. § 85-3-1(
			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Fill in this informa	ation to identify you	r case:			
Debtor 1					
Debior i	Phillip Dale Dan First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	cruptcy Court for the:	SOUTHERN DISTRICT OF MISSISSIPPI			
Case number					if this is an led filing
Official Form	106D				
		Who Have Claims Secure	ed by Property	У	12/15
		f two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors ha	ave claims secured by	your property?			
□ No. Check tl	his box and submit th	nis form to the court with your other schedules.	You have nothing else to	report on this form.	
Yes. Fill in a	all of the information b	pelow.			
Part 1: List All	Secured Claims				
		nore than one secured claim, list the creditor separate	Column A	Column B	Column C
for each claim. If mor	e than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Capital One	e Auto	Describe the property that secures the claim:	\$29,388.00	\$24,120.00	\$5,268.00
Creditor's Name		2020 Jeep Gladiator 109000 miles			
Attn: Bankr 7933 Presto Plano, TX 7	on Rd	As of the date you file, the claim is: Check all that apply. □ Contingent			
Number, Street, C	ity, State & Zip Code	☐ Unliquidated			
Who owes the debt	t? Check one	Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only	- Circon one.	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)	5000100		
☐ Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim community debt		Other (including a right to offset)			
	Opened 10/23 Last Active				

Date debt was incurred 3/13/25

1001

Last 4 digits of account number

Deptor 1 Phillip Dale Daniels	Ca	ase number (if known)		
First Name Middle N	Name Last Name			
2.2 Community Bank	Describe the property that secures the claim:	\$22,310.00	\$36,000.00	\$0.00
Creditor's Name	3948 CR 23 Louin, MS 39338 Jasper			70.00
Attn: Bankruptcy	County			
1905 Community Bank	As of the date you file, the claim is: Check all that			
Wy Flowood, MS 39232	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secu	red		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgage			
Opened 4/25/23 Last Active				
Date debt was incurred 05/25	Last 4 digits of account number 6931			
2.3 Connexus Credit Union	Describe the property that secures the claim:	\$14,198.00	\$15,210.00	\$0.00
Creditor's Name	2016 Keystone Spring Dale Camper			
Attn: Bankruptcy				
P.O.Box 8026	As of the date you file, the claim is: Check all that apply.			
Wausau, WI 54402	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortgage or secu	red		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Opened				
06/21 Last Active				
Date debt was incurred 4/29/25	Last 4 digits of account number 8332			

Debtor 1 Phillip Dale Daniels		Case number (if known)		
First Name Middle Na	ame Last Name			
2.4 Lvnv Funding	Describe the property that secures the claim:	\$1,494.00	\$36,000.00	\$0.00
Creditor's Name	3948 CR 23 Louin, MS 39338 Jasper			
Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	r secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	n)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 12/24 Last Active 05/24	Last 4 digits of account number 601	19		
If this is the last page of your form, add write that number here:	olumn A on this page. Write that number here: the dollar value totals from all pages. r a Debt That You Already Listed	\$67,390.0 \$67,390.0		
trying to collect from you for a debt you or	e notified about your bankruptcy for a debt that we to someone else, list the creditor in Part 1, ar you listed in Part 1, list the additional creditors is page.	nd then list the collection agen	cy here. Similarly, if you h	ave more
Name, Number, Street, City, State & Jacob Law Group P.O. Box 948 Oxford, MS 38655	. 311	which line in Part 1 did you enter	the creditor? 2.4	

Fill in this inf	ormation to identify your	case:			
Debtor 1	Phillip Dale Danie	els			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					
(if known)					check if this is an
				a	mended filing
Official Fo	orm 106E/F				
	E/F: Creditors W	ho Have Unseci	ured Claims		12/15
			PRIORITY claims and Part 2 for credite	ore with NONPRIORITY clair	
Schedule G: Exe Schedule D: Cre eft. Attach the (ecutory Contracts and Unexpeditors Who Have Claims Sec	ired Leases (Official Form of ured by Property. If more sp	 Also list executory contracts on Sci 106G). Do not include any creditors w pace is needed, copy the Part you nee on to report in a Part, do not file that F 	ith partially secured claims ed, fill it out, number the en	that are listed in tries in the boxes on the
	t All of Your PRIORITY Un				
	ditors have priority unsecure	d claims against you?			
No. Go	to Part 2.				
☐ Yes.					
Part 2: Lis	t All of Your NONPRIORIT	Y Unsecured Claims			
	editors have nonpriority unsec				
			number of the control		
□ NO. YOU	have nothing to report in this p	art. Submit this form to the co	burt with your other schedules.		
Yes.					
unsecured	claim, list the creditor separately	y for each claim. For each cla	der of the creditor who holds each cla im listed, identify what type of claim it is. 3.If you have more than three nonpriority	Do not list claims already inc	cluded in Part 1. If more
					Total claim
4.1 Ame i	rican Express	Last 4 digits	s of account number		\$884.00
•	ority Creditor's Name	NA/In any company	the debt in come dO		
	Box 981537 iso, TX 79998	wnen was t	the debt incurred?		-
	er Street City State Zip Code	As of the da	ate you file, the claim is: Check all that	apply	
Who ii	ncurred the debt? Check one.				
Del	btor 1 only	☐ Continge	ent		
☐ Del	btor 2 only	☐ Unliquida	ated		
☐ Del	btor 1 and Debtor 2 only	☐ Disputed	I		
☐ At I	least one of the debtors and and	other Type of NO	NPRIORITY unsecured claim:		
☐ Ch	eck if this claim is for a comi				
debt	alaim auhiaat ta affaat?		ons arising out of a separation agreemen	t or divorce that you did not	
_	claim subject to offset?	report as pri	ority claims pension or profit-sharing plans, and other	or similar dobts	
■ No		<u></u>		er similiar dedis	
☐ Yes	S	Other. S	pecify		

Debto	Phillip Dale Daniels		Case number (if known)	
4.2	Aspire	Last 4 digits of account number		\$1,469.09
	Nonpriority Creditor's Name P.O. Box 105555	When was the debt incurred?		
	Atlanta, GA Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,	The choose all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other. Specify		
4.3	Avant	Last 4 digits of account number	1151	\$287.00
	Nonpriority Creditor's Name 222 North Lasalle St Suite 1600 Chicago III 60601	When was the debt incurred?	Opened 03/19 Last Active 05/25	
	Chicago, IL 60601 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-shari		
	Yes	Other. Specify Credit Care	<u>d</u>	
4.4	Best Egg Nonpriority Creditor's Name	Last 4 digits of account number		\$12,984.20
	PO BOX 1216 Chesapeake, VA 23327	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes ☐ Other. Specify			

Debtor	Phillip Dale Daniels		Case number (if known)	
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6885	\$1,046.00
	Attn: Bankruptcy P.O. Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 07/18 Last Active 06/24	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.6	CFNA	Last 4 digits of account number	4545	\$2,143.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 81315	When was the debt incurred?	Opened 01/20 Last Active 06/24	
	Cleveland, OH 44181 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	, o auto you, o	or chook an that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.7	Citi Bank	Last 4 digits of account number		\$1,053.00
	Nonpriority Creditor's Name PO BOX 6406	When was the debt incurred?		
	Sioux Falls, SD 57117 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	7.5 of the date you me, the claim.	o. Oncox an mat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	I	

Debto	r1 Phillip Dale Daniels		Case number (if known)	
4.8	Citi Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$654.00
	PO BOX 6406	When was the debt incurred?	2022	
	Sioux Falls, SD 57117	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.9	Citibank	Last 4 digits of account number	6719	\$2,089.00
	Nonpriority Creditor's Name	_		+=,000.00
	Centralized Bankuptcy		Opened 10/22 Last Active	
	Po Box 790040	When was the debt incurred?	05/24	
	St Louis, MO 63179 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Check all that apply	
	■ Debtor 1 only	Continues t		
	_	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Label a	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	<u> </u>	Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No			
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Citibank	Last 4 digits of account number	2367	\$1,370.00
ر ت	Nonpriority Creditor's Name	_		
	Centralized Bankruptcy		Opened 03/19 Last Active	
	Po Box 790046 St Louis, MO 63179	When was the debt incurred?	05/24	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
		`		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	At least one of the debtors and another	Student loans	a Olamin.	
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
			01 ,	
	☐ Yes	Other. Specify Credit Card	<u> </u>	

Debt	or 1 Phillip Dale Daniels	Case number (if known)	
4.1	Comenity Bank	Last 4 digits of account number	\$755.00
1	Nonpriority Creditor's Name		4.00.00
	P.O. Box 183044	When was the debt incurred?	
	Columbus, OH 43218-3044	As at the date way file the plains in Oberland that such	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.1	Comenity Bank	Last 4 digits of account number 0753	\$2,460.69
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ2,400.00
	P.O. Box 183044	When was the debt incurred?	
	Columbus, OH 43218-3044		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	_	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Comenity Bank		\$2,100.00
3	Nonpriority Creditor's Name	Last 4 digits of account number	φ2,100.00
	P.O. Box 183044	When was the debt incurred?	
	Columbus, OH 43218-3044		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify	

Debt	or 1 Phillip Dale Daniels		Case number (if known)		
4.1 4	Comenity Bank	Last 4 digits of account number		\$750.00	
4	Nonpriority Creditor's Name P.O. Box 182120	When was the debt incurred?		<u> </u>	
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
		Type of NONPRIORITY unsecured	d claim:		
	At least one of the debtors and another	Student loans	a ordini.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes		g plants, and only online 2000		
4.1 5	Comenity Bank	Last 4 digits of account number		\$955.00	
J	Nonpriority Creditor's Name P.O. Box 182120	When was the debt incurred?		<u> </u>	
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
		Type of NONPRIORITY unsecured	d claim:		
	At least one of the debtors and another	☐ Student loans	. J.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	•			
4.1	Continental Finance Co	Last 4 digits of account number	5768	\$1,279.00	
6	Nonpriority Creditor's Name				
	Attn: Bankruptcy		Opened 03/20 Last Active		
	4550 Linden Hill Rd Ste 4	When was the debt incurred?	05/24		
	Wilmington, DE 19808				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	☐ Debts to pension or profit-sharin			
	□ Yes	Other Specify Credit Card			

Credit Coastal LLC	Last 4 digits of account number		\$1,494.00
Nonpriority Creditor's Name 3300 Rider Trail Ste. 500	When was the debt incurred?		
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
_	П		
_	•		
_ ′			
<u> </u>		d claim:	
_		d Claim.	
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	· ·	
No	·		
Yes	Other. Specify Credit Card	<u> </u>	
Discover Financial	Last 4 digits of account number	0353	\$964.00
Attn: Bankruptcy Po Box 3025	When was the debt incurred?	Opened 10/22 Last Active 05/24	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
First State Bank	Last 4 digits of account number		\$1,917.00
1808 Hwy 84 W	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
	<u> </u>		
☐ At least one of the debtors and another		d claim:	
☐ Check if this claim is for a community	Student loans		
		ration agreement or divorce that you did not	
	<u>-</u>	g plans, and other similar debts	
	Nonpriority Creditor's Name 3300 Rider Trail Ste. 500 Earth City, MO 63045 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Discover Financial Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes First State Bank Nonpriority Creditor's Name 1808 Hwy 84 W Laurel, MS 39440 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the Community Creditor's Name 1808 Hwy 84 W Laurel, MS 39440 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Nonpriority Creditor's Name 3300 Rider Trail Ste, 500 Earth City, MO 63045 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Discover Financial Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State Bank Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt State Bank Nonpriority Creditor's Name 1808 Hwy 84 W Laurel, MS 39440 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only	Nonpriory Creditor's Name Salos Richard Tails Ste. 500 Sarth City, MO 63045

Debt	or 1 Phillip Dale Daniels		Case number (if known)		
4.2 0	Fnb Omaha	Last 4 digits of account number	6997	\$4,766.00	
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 3128 Omaha, NE 68103	When was the debt incurred?	Opened 05/22 Last Active 06/24		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte		
	■ No	·			
	Yes	Other. Specify Credit Card			
4.2 1	Fortiva Nonpriority Creditor's Name	Last 4 digits of account number	0263	\$1,006.00	
	Attn: Bankruptcy Po Box 105555 Atlanta, GA 30348	When was the debt incurred?	Opened 07/21 Last Active 05/24		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Credit Card			
4.2 2	Fortiva Newsista Condition News	Last 4 digits of account number	3619	\$933.00	
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 105555 Atlanta, GA 30348	When was the debt incurred?	Opened 12/21 Last Active 05/24		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	unity ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin			
	☐ Yes	Other. Specify Credit Card	<u> </u>		

Debto	Phillip Dale Daniels	Case number (if known)			
4.2	Fortiva	Last 4 digits of account number	9052	\$407.00	
3	Nonpriority Creditor's Name				
	Attn: Bankruptcy		Opened 07/23 Last Active		
	P.O. Box 105555	When was the debt incurred?	05/24		
	Atlanta, GA 30348 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	As of the date you file, the claim	5. Спеск ан тат арргу		
	_				
	Debtor 1 only	Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	Lvnv Funding	Last 4 digits of account number	3106	\$10,007.00	
4	Nonpriority Creditor's Name			410,007.00	
	Attn: Bankruptcy		Opened 10/24 Last Active		
	Po Box 10497	When was the debt incurred?	02/24		
	Greenville, SC 29603				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	_			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Cross Rive	Company Account Best Egg r Bank		
4.2 5	Lvnv Funding	Last 4 digits of account number	6695	\$789.00	
	Nonpriority Creditor's Name		Opened 44/24 Lest Astive		
	Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 11/24 Last Active 04/24		
	Greenville, SC 29603	When was the dest mounted.	04/24		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	_				
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.		
	At least one of the debtors and another		a Ciaiii.		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	_	Debts to pension or profit-sharin	a plane, and other similar debte		
	■ No	·			
	∏ ves	Factoring C	Company Account Credit One		

Debto	Phillip Dale Daniels	Case number (if known)				
4.2	Lvnv Funding	Last 4 digits of account number	9749	\$682.00		
6	Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number	Opened 12/24 Last Active	Ψ002.00		
	Po Box 10497 Greenville, SC 29603	When was the debt incurred?	05/24			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Bank N.A.	Company Account Credit One			
4.2	Mercury/FBT	Last 4 digits of account number	8550	\$376.00		
1	Nonpriority Creditor's Name			********		
	Attn: Bankruptcy Po Box 84064	When was the debt incurred?	Opened 07/21 Last Active 03/25			
	Columbus, GA 31908 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
	Who incurred the debt? Check one.	, ,	7			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.2	Merrick Bank Corp	Last 4 digits of account number	1054	\$974.00		
8	Nonpriority Creditor's Name			Ψονσο		
	Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 08/18 Last Active 06/24			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	∏ yes	Other Specify Credit Card				

Phillip Dale Daniels		Case number (if known)		
Mission Lane LLC	Last 4 digits of account number	4384	\$398.00	
Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 105286 Atlanta, GA 30348	When was the debt incurred?	Opened 06/19 Last Active 06/24		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Credit Card	l		
Synchrony Bank	Last 4 digits of account number	7173	\$3,469.00	
Nonpriority Creditor's Name Attn: Bankruptcy		Opened 4/07/22 Last Active		
P.O. Box 965065 Orlando, FL 32896	When was the debt incurred?	04/24		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	□ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	tration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Credit Card	<u> </u>		
Synchrony Bank	Last 4 digits of account number	2494	\$1,456.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 4/09/19 Last Active 02/25		
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes	■ Other. Specify Charge Acc	count		

Phillip Dale Daniels		Case number (if known)		
Synchrony Bank	Last 4 digits of account number	1072	\$1,198.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 6/04/21 Last Active 05/24		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
_				
■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Credit Card	<u> </u>		
Synchrony Bank	Last 4 digits of account number	0474	\$1,025.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 10/28/22 Last Active 12/26/24		
lumber Street City State Zip Code /ho incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	□ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
Yes	Other. Specify Credit Card	<u> </u>		
Synchrony Bank	Last 4 digits of account number	3440	\$684.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 9/27/18 Last Active 09/24		
Number Street City State Zip Code Nho incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt s the claim subject to offset? —	report as priority claims	ration agreement or divorce that you did not		
No	Debts to pension or profit-sharin			
☐ Yes	Other Specify Charge Acc	count		

Debto	r 1 Phillip Dale Daniels	Case number (if known)		
4.3	Synchrony Bank	Last 4 digits of account number	4032	\$561.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando El 33806	When was the debt incurred?	Opened 9/20/18 Last Active 09/24	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.3	Synchrony Bank	Last 4 digits of account number	2698	\$435.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. P.O. Box 965065 Orlando, FL 32896	When was the debt incurred?	Opened 12/09/22 Last Active 08/24	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.3	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$780.00
	PO BOX 71727 Philadelphia, PA 19176	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	No	Debts to pension or profit-sharing		
	Yes	■ Other, Specify Credit Card	I	

Debt	or 1 Phillip Dale Daniels		Case number (if known)			
4.3 8	Target	Last 4 digits of account number	6083	\$616.00		
<u> </u>	Nonpriority Creditor's Name Fin. & Retail Serv Mailstop BT PO Box 9475	When was the debt incurred?	Opened 12/20 Last Active 03/25			
	Minneapolis, MN 55440	_				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card				
4.3	TD Bank	Look & divide of account months		\$562.00		
9	Nonpriority Creditor's Name P.O. Box 673	Last 4 digits of account number When was the debt incurred?		Ψ302.00		
	Minneapolis, MN 55440					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit Card				
4.4 0	Telerecovery	Last 4 digits of account number	1774	\$2,070.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 3800 Florida Ave. Ste 100	When was the debt incurred?	Opened 1/16/24 Last Active 07/22			
	Kenner, LA 70065 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Medical De	bt Medical			
		. ,				

or 1 Phillip Dale Daniels	Case number (if known)	
The Bank of Missoui	Last 4 digits of account number	\$2,100.00
Nonpriority Creditor's Name PO BOX 309	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
<u>_</u>		
_		
<u> </u>	·	
_		
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
•	<u></u>	
■ No □ Yes		
Wex Bank	Last 4 digits of account number	\$2,454.55
PO Box 639	When was the debt incurred? 2023	
	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	у	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	-	
	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
	Last 4 digits of account number	\$2,120.00
PO BOX 6293	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	
	The Bank of Missoui Nonpriority Creditor's Name PO BOX 309 Perryville, MO 63775 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Wex Bank Nonpriority Creditor's Name PO Box 639 Portland, ME 04104 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Wex Bank Nonpriority Creditor's Name PO BOX 6293 Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	The Bank of Missoui Norprority Creditor's Name POBOX 309 PerryvIlle, MO 63775 Number Street City State 2 pC code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Ves Norprority Creditor's Name POBOX 309 Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Check if this claim is for a community debt Is the claim subject to offset? Check if this debt? Check and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 6 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 5 only Debtor 5 only Debtor 6 only 1 only Debtor 6 only 1 only Debtor 7 only Debtor 9 only Debtor 1 only 1 only Debtor 1

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Phillip Dale Daniels	Case number (if known)
Crown Asset Management 3100 Breckenridge Blvd Ste 725	Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Duluth, GA 30096	Last 4 digits of account number
Name and Address GGR Attn Roger Gutierrez PO Box 571811 Houston, TX 77257	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.42 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address Jacob Law Group P.O. Box 948 Oxford, MS 38655	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Jacob Law Group P.O. Box 948 Oxford, MS 38655	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.25 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Jefferson Capital PO Box 23051 Columbus, GA 31902	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Mary Daniels 3948 County Road 23 Louin, MS 39338	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.31 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number
Name and Address Spring Oaks Capital 1400 Crossways Blvd Suite 100 B Chesapeake, VA 23334	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 76,522.53

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Debtor 1	Phillip D	ale Daniels	Case nui	mber (if known)		
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	76,522.53	

Fill in this inform	mation to identify your	case:				
Debtor 1	Phillip Dale Danie	els				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI			
Case number _					☐ Check if this is an	1
					amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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	is information to identify your							
Debtor 1	Phillip Dale Danie	Middle Name	Last Name					
Debtor 2								
(Spouse if, f	iling) First Name	Middle Name	Last Name					
United St	tates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI					
Case nur	mber							
(if known)					☐ Check if this is an amended filing			
	al Form 106H	_						
Sche	dule H: Your Cod	ebtors			12/15			
□ No ■ Ye 2. Wi Arizo		ı lived in a community pr	operty state or territory?	(Community property	states and territories include			
	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?					
in lin Form	ne 2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make sui	re you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fil			
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:			
3.1	Mary Daniels 3948 County Road 23 Louin, MS 39338			■ Schedule D, line □ Schedule E/F, li □ Schedule G Capital One Auto	ine			

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill	in this information	to identify your ca	ase:				1			
Del	otor 1	Phillip Dale	Daniels							
	otor 2 ouse, if filing)									
Uni	ted States Bankrup	otcy Court for the	: SOUTHERN DISTRIC	T OF MISSISSIPPI						
	se number							ed filing ent showing	g postpetition ch llowing date:	napter
0	fficial Form	106I					MM / DD/ \	YYYY		
S	chedule I:	Your Inc	ome							12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i ude infori	s liv natio	ing with you, incl on about your sp	ude inform ouse. If mo	ation about your re space is ne	our eded,
1.	Fill in your emplinformation.	in your employment rmation.		Debtor 1		Debtor 2	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	Fundament status	■ Employed			☐ Empl	☐ Employed			
		Employment status	☐ Not employed		■ Not e	■ Not employed				
	employers.		Occupation	Operator						
	Include part-time self-employed wo		Employer's name	Bakelite Chemi	cals					
	Occupation may or homemaker, if		Employer's address	1800 Meidinger Louisville, KY						
			How long employed the	here? 10 Yea	rs					
Par	t 2: Give De	tails About Mor	nthly Income							
	mate monthly incurse unless you are		ate you file this form. If	you have nothing to	report for	any	line, write \$0 in the	space. Incl	lude your non-f	iling
	u or your non-filing e space, attach a s		ore than one employer, co	ombine the information	on for all e	emplo	oyers for that perso	on on the lin	es below. If you	u need
							For Debtor 1	For Deb	tor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	6,888.92	\$	0.00	
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	

Calculate gross Income. Add line 2 + line 3.

0.00

6,888.92

\$

0.00

0.00

Deb	tor 1	Phillip Dale Daniels		Case	e number (if known)				
	0	and the same		Fo	r Debtor 1	no	r Debtor n-filing s	pouse	
	Cop	y line 4 here	4.	\$_	6,888.92	\$_		0.00	<u>)</u>
5.	List	all payroll deductions:							
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5a. 5b. 5c.	\$_ \$_ \$_	1,102.23 0.00 826.67	\$_ \$_ \$_		0.00	<u>)</u>)
	5d. 5e. 5f.	Required repayments of retirement fund loans Insurance Domestic support obligations	5d. 5e. 5f.	\$_ \$_ \$_	125.80 181.11 0.00	\$_ \$_ \$_		0.00 0.00 0.00)
	5g. 5h.	Union dues Other deductions. Specify: life ADD	5g. 5h.+	\$_	0.00	* - * - * - * - * -		0.00	<u>)</u>
		Crit III	_	\$_ \$_ \$_	30.29	\$_		0.00)
6.	Δda	accident I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$_ \$	13.33 2,380.38	\$_ \$		0.00	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	4,508.54	\$ \$		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		_		_			_
	8b.	monthly net income. Interest and dividends	8a. 8b.	\$_ \$	0.00	\$_ \$		79.96	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_ \$	0.00	\$_ \$		0.00	_
	8d.	Unemployment compensation	8d.	\$	0.00	\$-		0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$_	0.00	\$_	1,	382.00	<u>)</u>
	9.0	Specify: Pension or retirement income	_ 8f.	\$_ \$	0.00	\$_ \$		0.00	
	8g. 8h.	Other monthly income. Specify: LTD	8g. 8h.⊣	: -	0.00	э ₋ +\$		0.00	_
	011.	Mineral Rights Net	_	\$_ _	0.00	\$_ 		304.33	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$_	2	2,401.2	29
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,508.54 + \$_	2	,401.29	= \$_	6,909.83
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		Schedule	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies					e. 12.	\$	6,909.83
13.	Do y	you expect an increase or decrease within the year after you file this form?	?					Comb month	ined ily income
		No. Yes Explain:							1

Fill	in this information to identify your case:				
Deb	Phillip Dale Daniels			ck if this is: An amended filing	
	otor 2		_	A supplement show	ving postpetition chapter
(Spo	ouse, if filing)			13 expenses as of t	the following date:
Unit	ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSI	SSIPPI	-	MM / DD / YYYY	
	nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f mber (if known). Answer every question.				
	t 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate House	hold of Deb	tor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Grandson		1	■ Yes
		Daughter		33	□ No ■ X
		Daugittei			■ Yes □ No
					□ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Est	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on Schedule I: Y ficial Form 106I.)			Your expe	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$	S	690.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	3	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		100.00
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor	me equity loons	4d. \$		0.00

Deb	tor 1 Phillip Dale Daniels	Case number (if known)	
6.	Utilities:		
•	6a. Electricity, heat, natural gas	6a. \$	500.00
	6b. Water, sewer, garbage collection	6b. \$	84.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	444.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies	7. \$	938.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	
		10. \$	180.00
	Personal care products and services	·	90.00
11.		11. \$	50.00
12.		12. \$	200.00
12	Do not include car payments.	13. \$	
	Entertainment, clubs, recreation, newspapers, magazines, and books	· —	0.00
	Charitable contributions and religious donations	14. \$	0.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45- D	
	15a. Life insurance	15a. \$	0.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	312.00
	15d. Other insurance. Specify:	15d. \$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify: Car Registration	16. \$	31.67
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a. \$	0.00
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify:	17c. \$	0.00
	17d. Other. Specify:	17d. \$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as	·	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		0.00
19.	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	
20.		edule I: Your Income.	
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	0.00
24		21. +\$	
۷۱.	Other: Specify: Pet Care		20.00
	SSI not included pursuant to Beaulieu, Jr. v. Ragos	+\$	1,382.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	5,021.67
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	3,021.07
		· <u></u>	
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	5,021.67
23	Calculate your monthly net income.		
20.	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	6,909.83
	23b. Copy your monthly expenses from line 22c above.	23b\$	
	ZOD. COPY YOUR HIGHLING EXPENSES HOTH IIITE ZZO ADOVE.	Δ υυ. "φ	5,021.67
	23c. Subtract your monthly expenses from your monthly income.		
	The result is your <i>monthly net income</i> .	23c. \$	1,888.16
	The result is your monthly her income.		·
24.	Do you expect an increase or decrease in your expenses within the year after your	ou file this form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect you		ease or decrease because of a
	modification to the terms of your mortgage?		
	■ No.		
	☐ Yes. Explain here:		
	ш тоо. <u>Ехринттого.</u>		

Elli in this info					
	mation to identify your				
Debtor 1	Phillip Dale Danie First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					
(if known)					☐ Check if this is an amended filing
f two married po fou must file thing	tion About a	n connection with a ban	onsible for supplyin	ng correct information.	atement, concealing property, or ,000, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill	l out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedule	es filed with this declara	ation and
X /s/ Phi	illip Dale Daniels		x		
Phillip	Dale Daniels ure of Debtor 1			ture of Debtor 2	
Date	July 14, 2025		Date		

Fill i	n this inforn	nation to identify you	r case:			
Debt	tor 1	Phillip Dale Dan	iels			
		First Name	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bai	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF MISSISSIPPI		
Case	e number					
(if kno						heck if this is an mended filing
~ "	–	407				
	icial Fo		Affaira far Individ	luala Eilina far D	on krumtov	0.4/0
			Affairs for Individ			04/2
infori	mation. If m	ore space is needed,	attach a separate sheet to		equally responsible for support additional pages, write you	
numk	oer (if knowr	n). Answer every que	stion.			
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. '	What is you	r current marital statu	ıs?			
	■ Married □ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	_		·	·		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
-	_	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Evnlai	n the Sources of You	r Income			
ı arı	Explai	True dources or rou	i ilicollic			
I	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$41,333.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Del	btor 1	Phillip Dale I	<u>Daniels</u>		Cas	e number (if known)		
	_							
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
		lendar year: to December	31, 2024)	■ Wages, commissions, bonuses, tips	\$67,667.00	☐ Wages, combonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
		endar year be to December		■ Wages, commissions, bonuses, tips	\$66,545.00	☐ Wages, combonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
	and oth winning	ner public benefgs. If you are fili	it payments; png a joint cas	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separa	rest; dividends; money collect you received together, list it of	cted from lawsuits; only once under D	royalties; and ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Par 6.		her Debtor 1's	or Debtor 2'	Made Before You Filed for s debts primarily consume	r debts?	te are defined in 11	1150 8 100	1/9) as "incurred by an
				ebtor 2 has primarily consupersonal, family, or househo		is are defined in 11	0.5.0. § 10	r(6) as incurred by an
		During the No.	Go to line 7.	re you filed for bankruptcy, di ach creditor to whom you pai	, , , ,			ne total amount you
		* Subject	not include p	editor. Do not include paymer payments to an attorney for the on 4/01/28 and every 3 year	nis bankruptcy case.	•		•
	■ Ye			r both have primarily consure you filed for bankruptcy, di		al of \$600 or more?	?	
		□ No.	Go to line 7.					
		■ Yes	include payr	ach creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Credit	tor's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for
	Only	regular insta	llment payı	ments.	\$0.00	\$0.00	☐ Mortgaç ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplie ☐ Other_	Card

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Der	nor rilling Dale Dameis		Cas	e number (# known)	
	·					
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pof which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partner or more of their voting	erships of which y g securities; and a	ou are a general any managing ag	partner; corporations ent, including one for
	NoYes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or co		ments or transfer a	nny property on	account of a del	ot that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures	pu.u	S S S	o.uuo o.ou.	0.0.1.0
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
	LVNV Funding LLC vs Phillip Daniels Book 36 Page 3111	Collections	Jasper County Court 27 8th Ave E Bay Springs, M		■ Pending □ On appea □ Conclude	
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, f	oreclosed, garni	shed, attached,	seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property Explain what happened	4	Date		Value of the property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.	ptcy, did any creditor, inc		nancial institutio	n, set off any ar	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for bankrups court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess			it of creditors, a

De	Phillip Dale Daniels		Case number	(if known)	
Pa	t 5: List Certain Gifts and Contribution	ns			
13.	Within 2 years before you filed for bank ■ No	ruptcy	r, did you give any gifts with a total value of more t	han \$600 per person	?
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$6 per person	600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	d			
14.	Within 2 years before you filed for bank No	ruptcy	, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or	contrib	ution.		
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value
Pa	tt 6: List Certain Losses				
	or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred	Inclu	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	Roof damage from tornado	non	' '	5/27/25	\$6,000.00
	List Certain Payments or Transfe Within 1 year before you filed for bankr		did you or anyone else acting on your behalf pay	or transfer any prope	rty to anyone you
	consulted about seeking bankruptcy or	prepa			
	□ No■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	The Rollins Law Firm, PLLC P.O. Box 13767 Jackson, MS 39236 trollins@therollinsfirm.com		Filing fee, attorney fee, credit report and credit counseling	6/2/2025	\$650.00
17.		editors	did you or anyone else acting on your behalf pay of or to make payments to your creditors? isted on line 16.	or transfer any prope	rty to anyone who
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of payment

	Person Who Was Paid Address		Description and transferred	value of any pro	oper	rty	Date payment or transfer was made	Amount of payment
	Global Holding LLC 15 W 6th Ste Ste 1600 6th Floor Tulsa, OK 74119		Debt Consolida	ation			06/2024-12/20 24	\$5,718.90
	Within 2 years before you filed for bankrup transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousine ade a	ess or financial aff is security (such as	fairs? the granting of a				
	Person Who Received Transfer Address Person's relationship to you		Description and property transfer			paym	ribe any property or ents received or debts in exchange	Date transfer was made
	Star Chevrolet 1628 S Azalea Dr Wiggins, MS 39577		2020 Chevrolet	t Camaro		trade	-in	10/10/2023
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		•	ny property to a	ı sel	lf-settle	ed trust or similar device	of which you are a
	Name of trust		Description and	value of the pro	per	ty trans	sferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, In	strun	nents, Safe Depos	it Boxes, and St	tora	ge Uni	ts	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso ☐ No	or oth	ner financial accou	ınts; certificates	s of			
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		t 4 digits of ount number	Type of acco instrument	unt	or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	First State Bank 12139 Old Hwy 63 Lucedale, MS 39452	XX	κx-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other			05/2025	\$1.42
21.	Do you now have, or did you have within 1 cash, or other valuables?	year	before you filed fo	r bankruptcy, a	ny s	safe de	posit box or other depos	sitory for securities,
	■ No							
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		De	escribe	the contents	Do you still have it?

Debtor 1 Phillip Dale Daniels

Deb	tor 1 Phillip Dale Daniels		Case number (if known)	
22.	Have you stored property in a storage unit or pl	lace other than your home within 1	year before you filed for bankruptcy	?
	■ No □ Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	19: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Informa	ation		
For	the purpose of Part 10, the following definitions	apply:		
-	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul Site means any location, facility, or property as to own, operate, or utilize it, including disposal	ir, land, soil, surface water, ground bstances, wastes, or material. defined under any environmental	dwater, or other medium, including s	tatutes or
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	mental law defines as a hazardous	s waste, hazardous substance, toxic	substance,
Ren	ort all notices, releases, and proceedings that yo		n they occurred	
	Has any governmental unit notified you that you		•	ental law?
	No No			
	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No			
	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	•	ironmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	
Offici	al Form 107 Statement of	of Financial Affairs for Individuals Filing	g for Bankruptcy	page

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Debtor 1	Phillip Dale Daniels		Case number (if known)
	☐ A partner in a partnership		
	☐ An officer, director, or managing ex	ecutive of a corporation	
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation	
	No. None of the above applies. Go to F	Part 12.	
	Yes. Check all that apply above and fill	in the details below for each business.	
	siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
	nin 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? Include all financial
	No Yes. Fill in the details below.		
	ne dress nber, Street, City, State and ZIP Code)	Date Issued	
Part 12:	Sign Below		
are true a with a bar 18 U.S.C.	and correct. I understand that making a nkruptcy case can result in fines up to \$\$ 152, 1341, 1519, and 3571. ip Dale Daniels	false statement, concealing property, or \$250,000, or imprisonment for up to 20 y	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
	Dale Daniels re of Debtor 1	Signature of Debtor 2	
Date J	uly 14, 2025	Date	
Did you a ■ No □ Yes	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?
■ No		t an attorney to help you fill out bankrupt ptcy Petition Preparer's Notice, Declaration	

Fill in this inform	nation to identify your case	e:
Debtor 1	Phillip Dale Daniels	
Debtor 2 (Spouse, if filing)		
United States B	Sankruptcy Court for the:	Southern District of Mississippi
Case number (if known)		

Check	as directed in lines 17 and 21:
1	cording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	 Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						Colui Debt		Columnon-fil	
Your gross wages, salary, to payroll deductions).	ips, bonuse	s, overtime	, and	commissions (before	all	\$	6,888.92	\$	0.00
 Alimony and maintenance p Column B is filled in. 	ayments. D	o not include	e payr	nents from a spouse it	f (\$	0.00	\$	0.00
 All amounts from any source of you or your dependents, from an unmarried partner, me and roommates. Do not include you listed on line 3. Net income from operating. 	including c embers of you de payments	hild suppor our househol	t. Inclu	ude regular contributions ur dependents, parents	ons s, :s	\$	0.00	\$	0.00
business, profession, or far		or 1	D	ebtor 2					
Gross receipts (before all deductions)	\$	0.00	\$	203.96					
Ordinary and necessary operating expenses	-\$	0.00	-\$_	124.00					
Net monthly income from a business, profession, or farm	\$	0.00	\$	79.96 here	oy e -> \$	i	0.00	\$	79.96
6. Net income from rental and	other real p	roperty	Debt						
Gross receipts (before all ded	uctions)		\$	0.00					
Ordinary and necessary opera	ating expens	es	-\$	0.00					
Net monthly income from rent	al or other re	eal property	\$	0.00 Copy her	e -> \$	5	0.00	\$	0.00

					Column A Debtor 1		Column B Debtor 2 non-filing	or	
7.	Interest	, dividends, and royalties			\$	0.00	\$	574.20	
		loyment compensation			\$	0.00	\$	0.00	
	Do not e	enter the amount if you contend that the a al Security Act. Instead, list it here:	amount received was a ber	nefit under			·		
	For y	ou	\$	0.00					
	For ye	our spouse		0.00					
	benefit unot inclu United S disability pay paid does no	n or retirement income. Do not include under the Social Security Act. Also, excelled any compensation, pension, pay, and states Government in connection with a cy, or death of a member of the uniformed dunder chapter 61 of title 10, then includit exceed the amount of retired pay to who under any provision of title 10 other than	ot as stated in the next sen nuity, or allowance paid by disability, combat-related in services. If you received a e that pay only to the exter ich you would otherwise be	itence, do the ijury or any retired at that it	\$	0.00	\$	0.00	
	Do not in received domesti United Stability	from all other sources not listed above include any benefits received under the Stas a victim of a war crime, a crime again terrorism; or compensation, pension, postates Government in connection with a coy, or death of a member of the uniformed on a separate page and put the total belong.	locial Security Act; paymer nst humanity, or internation ay, annuity, or allowance p disability, combat-related in services. If necessary, list	nts nal or aid by the ijury or					
		LTD			\$	0.00	\$	635.00	
					\$	0.00	\$	0.00	
		Total amounts from separate pages, if a	iny.	+	\$	0.00	\$	0.00	
11.		te your total average monthly income. lumn. Then add the total for Column A to		\$	6,888.92	+ \$_	1,289.16	=[\$	8,178.08 tal average
Part	2: [Determine How to Measure Your Dedu	ctions from Income					mo	onthly income
		our total average monthly income fron te the marital adjustment. Check one:	n line 11.					\$	8,178.08
	□ Yo	u are not married. Fill in 0 below.							
	☐ Yo	u are married and your spouse is filing w	ith you. Fill in 0 below.						
	Fill	u are married and your spouse is not filin in the amount of the income listed in line	e 11, Column B, that was N						
	Be	pendents, such as payment of the spous- low, specify the basis for excluding this in ustments on a separate page.	•					•	
	•	nis adjustment does not apply, enter 0 be	elow.						
		NFS Royalties deductions		\$	269.8	37			
				_ \$					
				_ \$					
		Total		\$	269.8	<u> </u>	opy here=>		269.87
14.	Your o	surrent monthly income. Subtract line	3 from line 12.					\$	7,908.21
15.	Calcul	ate your current monthly income for t	he year. Follow these step	os:					
	15a. (Copy line 14 here=>						\$	7,908.21
		Multiply line 15a by 12 (the number of mo						x	12
	15b.	The result is your current monthly income	e for the year for this part o	f the form.				\$	94,898.52

Phillip Dale Daniels

Debtor 1

Debt	or 1 <u>P</u>	niliip Dale Daniels		Case number (if known)		
16	. Calcul	ate the median family income that applies to yo	u. Follow these steps:			
	16a. Fi	ll in the state in which you live.	MS			
	16b. Fi	Il in the number of people in your household.	3			
	To	I in the median family income for your state and single in the median family income for your state and single income amounts, structions for this form. This list may also be availa	go online using the link		\$	78,140.00
17	. How d	o the lines compare?				
	17a.	☐ Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NC				
	17b.	■ Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcularyour current monthly income from line 14 above.	ation of Your Disposa			
Par	t 3:	Calculate Your Commitment Period Under 11 U	.S.C. § 1325(b)(4)			
18.	Сору у	our total average monthly income from line 11			\$	8,178.08
19.	conten	t the marital adjustment if it applies. If you are not that calculating the commitment period under 11 is income, copy the amount from line 13.	narried, your spouse is	not filing with you, and you		
	19a. If	the marital adjustment does not apply, fill in 0 on li	ne 19a.		- \$	269.87
	19b. S ı	ubtract line 19a from line 18.			\$	7,908.21
20.	Calcul	ate your current monthly income for the year.	Follow these steps:		·	
	20a. C	opy line 19b	·		\$	7,908.21
		ultiply by 12 (the number of months in a year).			,	12
						12
	20b. Th	ne result is your current monthly income for the year	ar for this part of the for	rm	\$_	94,898.52
	20c. C	opy the median family income for your state and si	ze of household from li	ine 16c	\$_	78,140.00
	21. H	ow do the lines compare?				
		Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court,	on the top of page 1 of this form, cl	heck box 3, 7	The commitment
	-	Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ss otherwise ordered b	by the court, on the top of page 1 of	f this form, ch	neck box 4, The
Par	t 4:	Sign Below				
	By sign	ing here, under penalty of perjury I declare that the	e information on this st	atement and in any attachments is	true and corr	ect.
)	(/s/ Pi	nillip Dale Daniels				
•	Philli	p Dale Daniels				
	Date _	ture of Debtor 1 July 14, 2025				
	ı	MM/DD/YYYY				
	•	hecked 17a, do NOT fill out or file Form 122C-2.				
	If you c	hecked 17b, fill out Form 122C-2 and file it with thi	s form. On line 39 of th	nat form, copy your current monthly	income from	line 14 above.

Debtor 1	Phillip Dale Daniels	Case number (if known)	
----------	----------------------	------------------------	--

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 01/01/2025 to 06/30/2025.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment**

Year-to-Date Income:

Total Year-to-Date Income: **\$41,333.52** from check dated **6/30/2025**.

Average Monthly Income: **\$6,888.92**.

Debtor 1	Phillip Dale Daniels	Case number (if known)
----------	----------------------	------------------------

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **01/01/2025** to **06/30/2025**.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Fric n Frac Pottery
Constant income of <u>203.96</u> per month.
Constant expense of <u>124.00</u> per month.

Net Income **79.96** per month.

Line 7 - Interest, dividends, and royalties

Source of Income: Royalties

Income by Month:

6 Months Ago:	01/2025	\$853.30
5 Months Ago:	02/2025	\$772.94
4 Months Ago:	03/2025	\$477.48
3 Months Ago:	04/2025	\$470.29
2 Months Ago:	05/2025	\$508.83
Last Month:	06/2025	\$362.34
	Average per month:	\$574.20

Line 10 - Income from all other sources

Source of Income: LTD

Constant income of \$635.00 per month.

Non-CMI - Social Security Act Income

Source of Income: SSA

Constant income of \$1,382.00 per month.

Fill in	this information to i	dentify your case:						
Debto	r 1 Phillip Da	le Daniels						
Dalata								
Debto	r 2 se, if filing)							
(Spou	se, ii iiiiig)							
United	States Bankruptcy Co	ourt for the: South	ern District of Mississip	pi				
Case r	number							
(if kno	wn)				☐ Che	ck if this is	an amende	d filing
Officia	I Form 122C-2							
		culation of	Your Dispos	able Ir	ncome			04/25
	-		<u> </u>					
	out this form, you wi <i>itment Period</i> (Officia		eted copy of <i>Chapter</i>	13 Stateme	ent of Your Current Monti	nly Income a	nd Calculation	on of
	(2							
					ther, both are equally res			
	is needed, attach a s nal pages, write you			ne number	to which additional infor	mation appl	ies. On the to	op any
auuitio	—	i ilallie alla case il	umber (ii known).					
Part 1	Calculate Your	Deductions from Y	our Income					
					or certain expense amoun link specified in the sepa			
			nkruptcy clerk's offic		ilik specilieu ili tile sepa	ale monuci	10115 101 11115	IOIIII. IIIIS
						***	,	
					ense. In later parts of the fo penses that you subtracted			
					s income in line 13 of Form			<u> </u>
If vo	our expenses differ fro	m month to month	enter the average exper	nse				
,	·							
Note	e: Line numbers 1-4 a	re not used in this fo	rm. These numbers ap	ply to inform	nation required by a similar	form used in	n chapter 7 ca	ises.
5.	The number of peo	ple used in determ	ining your deductions	s from inco	me			
								1
					ederal income tax return,			
	the number of a		dents whom you suppor	rt. This num	nber may be different from		3	
	the number of people	o in your nouseriola.						J
Nat	ional Standards	You must use t	he IRS National Standa	ards to ansv	ver the questions in lines 6	-7.		
					•			
6.			the number of people to od, clothing, and other it		d in line 5 and the IRS Nation	onal	\$	1,753.00
	Standards, IIII III IIIE	aonai amount ioi ioi	o, olouling, and ouler i	ionio.				
7	Out-of-pookst healt	h caro allowence:	loing the number of	onlo vov	stored in line F and the IDC	Notional Ct-	ndordo fill :	
7.	the dollar amount for	out-of-pocket health	osing the number of pe care. The number of p	people is sp	ntered in line 5 and the IRS lit into two categoriespeo	ple who are t	under 65 and	
	people who are 65 o	r olderbecause old	er people have a highe	r IRS allowa	ance for health car costs. If			
	nigher than this IRS	amount, you may de	duct the additional amo	ount on line	22.			

Official Form 122C-2

People who are u	under 65 years of age						
7a. Out-of-p	pocket health care allowance per person	\$84	_				
7b. Number	r of people who are under 65	X3					
7c. Subtota	al. Multiply line 7a by line 7b.	\$ 252.00	Co	py here=>	\$	252.00	
People who are 6	65 years of age or older						
7d. Out-of-ր	pocket health care allowance per person	\$ 149	_				
7e. Number	r of people who are 65 or older	X0					
7f. Subtota	I. Multiply line 7d by line 7e.	\$0.00	Co	py here=>	\$	0.00	
7g. Total. A	odd line 7c and line 7f		\$252.	.00	Copy to	tal here=>	\$252.00
Local Standards	You must use the IRS Local Standards to	answer the quest	ions in lines 8-	15.			
	ation from the IRS, the U.S. Trustee Progoses into two parts:	ram has divided t	he IRS Local	Standard f	or housin	g for	
	utilities - Insurance and operating expens	ses					
■ Housing and	utilities - Mortgage or rent expenses						
	uestions in lines 8-9, use the U.S. Trustee tions for this form. This chart may also be					the link sp	pecified in the
8. Housing and	d utilities - Insurance and operating expe amount listed for your county for insurance a	nses: Using the nu	ımber of peopl			5, fill \$	867.00
9. Housing and	d utilities - Mortgage or rent expenses:						
	ne number of people you entered in line 5, fi r your county for mortgage or rent expenses				\$	383.00	
9b. Total av	verage monthly payment for all mortgages a	nd other debts sec	ured by your h	ome.			
contract	ulate the total average monthly payment, ad tually due to each secured creditor in the 60 kruptcy. Next divide by 60.						
Name o	of the creditor	Average mo	nthly				
		payment	, incliny				
Comm	unity Bank		689.00				
Comm	unity Bank 9b. Total average monthly paymen	\$	689.00 Co	py re=> -\$		689.00	Repeat this amount on line 33a.
		\$	689.00 Co			689.00	•
9c. Net moi	9b. Total average monthly paymen	\$ t \$om line 9a (mortga)	689.00 Co		194.00	689.00 Copy here=>	on line 33a.
9c. Net more Subtraction or rent of the subtraction	9b. Total average monthly payment rtgage or rent expense. It line 9b (total average monthly payment) from	t \$	689.00 Co her	**************************************		Copy here=>	on line 33a.

Phillip Dale Daniels

11.	Local transportation expenses: Check the number of vehi	cles for which you claim	an ownersh	ip or operating	expense.	
	☐ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for					562.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1: 2020 Jeep Gladiator 10	99000 miles				
13a	. Ownership or leasing costs using IRS Local Standard		. \$	662.00		
13b.	. Average monthly payment for all debts secured by Vehicle 1					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	Capital One Auto	\$ 624.41				
	Total Average Monthly Payment	\$624.41	Copy here =>	-\$ 624	Repeat this amount on line 33b.	
13c.	. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if the numbert is less than \$0	0, enter \$0	. \$	37.59	Copy net Vehicle 1 expense here => \$	37.59
Ve	hicle 2 Describe Vehicle 2:				_	
13d.	. Ownership or leasing costs using IRS Local Standard		. \$	0.00		
	. Average monthly payment for all debts secured by Vehicle 2 leased vehicles.					
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
	Total average monthly payment	\$0.00	Copy here => -\$ _	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense				Copy net Vehicle 2	
	Subtract line 13e from line 13d. if this number is less than \$0	o, enter \$0	. \$	0.00	expense here => \$	0.00
	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of	whether you use public	c transport	ation.	\$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in v not claim more than the IRS Local Standard for <i>Public Trans</i>	what you believe is the ap				0.00

Phillip Dale Daniels

Oth	er Necessary Expenses	In addition to the expense d the following IRS categories		ns listed above,	you are allowed your monthly expense	s for		
16.	self-employment taxes, soo your pay for these taxes. H	cial security taxes, and Medic lowever, if you expect to rece rom the total monthly amount	are taxe	es. You may inc c refund, you m	d local taxes, such as income taxes, lude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	1,102.23	
17.	Involuntary deductions: 7 contributions, union dues, a	The total monthly payroll deduand uniform costs.	uctions t	hat your job red	quires, such as retirement			
	Do not include amounts that	at are not required by your job	o, such a	as voluntary 40°	1(k) contributions or payroll savings.	\$_	0.00	
18.	filing together, include payr	ments that you make for your or life insurance on your depe	spouse	's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	96.01	
19.	Court-ordered payments: agency, such as spousal o		at you p	ay as required	by the order of a court or administrative			
	Do not include payments o	n past due obligations for spo	ousal or	child support. Y	ou will list these obligations in line 35.	\$_	0.00	
20.	Education: The total mont	hly amount that you pay for e	ducation	n that is either r	equired:			
	as a condition for your j	ob, or						
	for your physically or me	entally challenged dependent	child if	no public educa	ation is available for similar services.	\$	0.00	
21.		nly amount that you pay for chor any elementary or seconda		•	itting, daycare, nursery, and preschool.	\$	0.00	
22.		amount that you pay for health care not reimbursed by insurance or paid						
	Payments for health insura	\$	0.00					
23.	Optional telephone and to for you and your dependen phone service, to the exter income, if it is not reimburs Do not include payments for expenses, such as those re	+\$_	0.00					
24.	Add all of the expenses a Add lines 6 through 23.	allowed under the IRS expe	nse allo	wances.		\$	4,863.83	
Add	itional Expense Deduction	ns These are additional de	eduction	ns allowed by th	e Means Test.			
		Note: Do not include a		•				
25.	insurance, disability insuraryour dependents.	ity insurance, and health sa	avings a unts tha	account expen	ses. The monthly expenses for health y necessary for yourself, your spouse, or	or		
	Health insurance		\$	181.11				
	Disability insurance		\$	4.94				
	Health savings account		+ \$	0.00	1			
	Total		\$	186.05	Copy total here=>	\$	186.05	
	Do you actually spend this No. How much do y Yes	total amount? ou actually spend?	\$					
26.	Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).						0.00	
27.	. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.							
	By law, the court must keep	law, the court must keep the nature of these expenses confidential.						

Phillip Dale Daniels

20	Phillip Dale Daniels	Case number (if known)								
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and operating expenses on								
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy costs included in expenses on line ergy costs.	:							
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the additional ary.	\$_	0.00						
	Education expenses for dependent child \$214.58* per child) that you pay for your de public elementary or secondary school.	Iren who are younger than 18. The monthly expenses (not more than expendent children who are younger than 18 years old to attend a private or								
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.								
	* Subject to adjustment on 4/01/28, and eve	ery 3 years after that for cases begun on or after the date of adjustment.	\$	0.00						
		he monthly amount by which your actual food and clothing expenses are allowances in the IRS National Standards. That amount cannot be more s in the IRS National Standards.								
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.								
	You must show that the additional amount of	claimed is reasonable and necessary.	\$	0.00						
	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).									
	Do not include any amount more than 15% of your gross monthly income.									
	2. Add all of the additional expense deductions. Add lines 25 through 31.									
Dedı	ctions for Debt Payment		,							
		in property that you own, including home mortgages, vehicle								
lo	pans, and other secured debt, fill in lines	33a through 33e.								
lo T	pans, and other secured debt, fill in lines or calculate the total average monthly paym	33a through 33e. ent, add all amounts that are contractually due to each secured								
lo T	pans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually due to each secured		ge monthly ent						
T c	cans, and other secured debt, fill in lines o calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	Average payme							
T c	cans, and other secured debt, fill in lines o calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home	a3a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.		ent						
10 T c 33a.	cans, and other secured debt, fill in lines o calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles	a 33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.		ent						
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Debtor 1	Phill	lip Dale Daniels			Cas	se ni	umber (if known)			
		debts that you listed in line property necessary for you				е,				
	No.	Go to line 35.								
		State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your propert							
Name	of the	creditor	Identify property that se	ecures the deb	t	To	otal cure amount		Monthly	
-NO	NE-				\$			÷ 60 = \$	S	
					Total	\$	0.00	Copy total here	Φ.	0.00
		owe any priority claims - so due as of the filing date of				hat				
_	No.	Go to line 36.								
	Yes.	Fill in the total amount of al ongoing priority claims, suc			de current or					
		Total amount of all past-d	ue priority claims			\$	0.00	÷ 6	0 \$_	0.00
36. Pr	ojecte	d monthly Chapter 13 plan	payment			\$	1,128.93			
Of the To	fice of Exec find a l	nultiplier for your district as s the United States Courts (fo utive Office for United States ist of district multipliers that inclu nstructions for this form. This list	r districts in Alabama and s Trustees (for all other of des your district, go online of	d North Caroli listricts). using the link sp	ina) or by ecified in the	X .	10.00			
Av	erage	monthly administrative expe	nse				\$112.89	Copy to		112.89
37. A	\dd all	of the deductions for debt	t payment. Add lines 33	e through 36.					\$	1,727.97
Total	Deduc	tions from Income								
38. A c	dd all d	of the allowed deductions.								
		ne 24, All of the expenses ali e allowances	lowed under IRS	\$	4,863.83	3				
C	Copy lir	ne 32, All of the additional ex		\$	186.05	5_				
C	Copy lir	ne 37, All of the deductions f	or debt payment	+\$	1,727.97	7	٦			
Т	otal de	eductions		\$	6,777.85	5	Copy total here=>		\$	6,777.85

Jebtor 1	Phillip Daie Daniels Case number (if known)										
Part 2:	Det	ermine You	ır Disposable Income Under 11 l	J.S.C. § 1325	(b)(2)						
			rent monthly income from line 1 Current Monthly Income and Cal						\$		7,908.21
ch dis red	nildren sability ceived	The monthle payments for in accordance	ly necessary income you receively average of any child support payor a dependent child, reported in Poce with applicable nonbankruptcy lended for such child.	ments, foster art I of Form	r care pay 122C-1, th	ments, or at you	\$	(0.00		
em in	nployer 11 U.S	withheld fro .C. § 541(b)	etirement deductions. The month om wages as contributions for qual (7) plus all required repayments of . § 362(b)(19).	ified retireme	nt plans, a	s specified	\$	344	4.45		
42. To	otal of a	all deductio	ns allowed under 11 U.S.C. § 70	7(b)(2)(A). Co	opy line 38	3 here=	> \$	6,777	7.85		
ex the	penses eir expe	and you ha	al circumstances. If special circu ave no reasonable alternative, desi must give your case trustee a deta ocumentation for the expenses.	cribe the spec	cial circum	stances an	d				
Descr	ribe the	special cir	rcumstances		Amou	ınt of expe	ense				
					_ \$			-			
					\$						
					_ \$			-			
				Total \$	S	0.00	Co	py re=> \$	0.0	00	
44. To	otal adj	ustments. /	Add lines 40 through 43			=>	\$	7,122.30	Copy here=:	> - \$	7,122.30
45. C a	alculat	your mon	thly disposable income under §	1325(b)(2). S	Subtract lin	e 44 from I	ine 3	9.	\$		785.91
Part 3:	Cha	ange in Inco	ome or Expenses								
rep yo be 12	ported our band elow. Fo 22C-1 in	in this form I cruptcy petit or example, in the first col	or expenses. If the income in Form have changed or are virtually certarion and during the time your case if the wages reported increased af lumn, enter line 2 in the second con the increase occurred, and fill in the second content in the increase occurred.	in to change will be open, ter you filed y lumn, explain	after the of the infill in the irour petition why the v	ate you file formation n, check vages	d				
Form		Line	Reason for change		Dat	e of change		Increase or decrease?	Amo	unt of chang	je
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	2C-2 2C-1 2C-2 2C-1 2C-2 2C-1							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Decrease	\$ \$ \$		

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Phillip Dale Daniels	Case number (if known)
1	
Sign Below	
	e information on this statement and in any attachments is true and correct.
-	
Phillip Dale Daniels Signature of Debtor 1	
	/s/ Phillip Dale Daniels

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

In r	e	Phillip Dale Daniels		Case No.	
		D	Debtor(s)	Chapter	13
1	D	DISCLOSURE OF COMPENSATION			
1.	coı	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify impensation paid to me within one year before the filing of the petit rendered on behalf of the debtor(s) in contemplation of or in connection.	ion in bankruptcy, or ag	greed to be paid t	o me, for services rendered or to
		FLAT FEE			
		For legal services, I have agreed to accept		\$	4,600.00
		Prior to the filing of this statement I have received		\$	272.00
		Balance Due		\$	4,328.00
		RETAINER			
		For legal services, I have agreed to accept and received a retaine	er of	\$	
		The undersigned shall bill against the retainer at an hourly rate of [Or attach firm hourly rate schedule.] Debtor(s) have agreed to plees and expenses exceeding the amount of the retainer.		\$	
2.	Th	e source of the compensation paid to me was:			
		■ Debtor □ Other (specify):			
3.	Th	e source of compensation to be paid to me is:			
		■ Debtor □ Other (specify):			
4.		I have not agreed to share the above-disclosed compensation with	n any other person unles	ss they are memb	ers and associates of my law firm
		I have agreed to share the above-disclosed compensation with a property of the agreement, together with a list of the names of the pe			
5.	In	return for the above-disclosed fee, I have agreed to render legal se	rvice for all aspects of t	he bankruptcy ca	ase, including:
	b. c.	Analysis of the debtor's financial situation, and rendering advice to Preparation and filing of any petition, schedules, statement of affar Representation of the debtor at the meeting of creditors and confine [Other provisions as needed] Negotiations with secured creditors to reduce to make the reaffirmation agreements and applications as needed 522(f)(2)(A) for avoidance of liens on household go	irs and plan which may mation hearing, and an narket value; exempt led; preparation and	be required; y adjourned hear ion planning;	ings thereof; preparation and filing of

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

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In re	Phillip Dale Daniels		Case No.
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

	(Continuation Sheet)
	CERTIFICATION
I certify that the foregoing is a complete this bankruptcy proceeding.	statement of any agreement or arrangement for payment to me for representation of the debtor(s) in
July 14, 2025	/s/ Thomas C. Rollins, Jr.
Date	Thomas C. Rollins, Jr. 103469
	Signature of Attorney
	The Rollins Law Firm, PLLC
	P.O. Box 13767
	Jackson, MS 39236
	601-500-5533 Fax: 600-500-5296
	trollins@therollinsfirm.com
	Name of law firm